

Parkinson's Disease*

(Part III)

Symptoms and Diagnosis (Part 1)

Parkinson's disease does not affect everyone the same way. Symptoms of the disorder and the rate of progression differ among people with the disease. Sometimes people dismiss early symptoms of Parkinson's as the effects of normal aging. There are no tests to diagnose the disease, so it can be difficult to diagnose accurately.

Early symptoms of Parkinson's disease are subtle and occur gradually. For example, affected people may feel mild tremors or have difficulty getting out of a chair. They may notice that they speak too softly or that their handwriting is slow and looks cramped or small. This very early period may last a long time before the more classic and obvious symptoms appear.

Friends or family members may be the first to notice changes in someone with early Parkinson's. They may see that the person's face lacks expression and animation, a condition known as "masked face," or that the person does not move an arm or leg normally. They also may notice that the person seems stiff, unsteady, or unusually slow.

As the disease progresses, symptoms may begin to interfere with daily activities. The shaking or tremor may make it difficult to hold utensils steady or read a newspaper. Tremor is usually the symptom that causes people to seek medical help.

People with Parkinson's often develop a so-called *parkinsonian gait* that includes a tendency to lean forward, small quick steps as if hurrying forward (called festination), and reduced swinging of the arms. They also may have trouble initiating or continuing movement, which is known as *freezing*.

Symptoms often begin on one side of the body or even in one limb on one side of the body. As the disease progresses, it eventually affects both sides. However, the symptoms may still be more severe on one side than on the other. The four primary symptoms of Parkinson's are tremor, rigidity, slowness of movement (bradykinesia), and impaired balance (postural instability).

Tremor often begins in a hand, although sometimes a foot or the jaw is affected first. It is most obvious when the hand is at rest or when a person is under stress. It usually disappears during sleep or improves with a deliberate movement.